## NEWSNOTES

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MEDICAL CER-2 T 1946

SECRETARY PATTERSON EXTOLLS ARMY INDUSTRIAL MEDICAL PROGRAM IN LABOR DAY ADDRESS

In a Labor Day address before the annual convention of the International Brotherhood of Electrical Workers (AF of L) in San Francisco, California, The Honorable Robert P. Patterson, Secretary of War, praised the Army Medical Department's Industrial Hygiene program.

Accompanying Mr. Patterson to San Francisco were Major General Norman T. Kirk, The Surgeon General: Brigadier General Paul Yount, Assistant Chief of Transportation; Colonel A. Robert Ginsburgh, Executive Assistant to The Secretary; and Lieutenant Colonel John K. Waters, The Secretary's Aide.

Referring to the Army's industrial medical program, Mr. Patterson said:

"Of interest to all industry is the Army's industrial medical program. Designed primarily for the plants and installations operated by the Army with civilian employees, the program, we are confident, will be of great worth to all industry, large and small, for the benefit of the Army experience, so far as security will permit, will be available to management and labor.

"This program is a positive one. Army Regulations 40-220, which govern the program, state that:

"Civilian employees of the War Department installations manufacturing, processing, storing, shipping or repairing supplies and equipment will be afforded an 'on-the-job' medical and surgical service; they will be assured that they are physically fit for the job to which they are assigned, and that safe and hygienic working conditions wild be maintained."

"That there are hazards in producing the modern weapons of war the Army knows very well. Powerful electrical equipment, which your members will install or operate, is an example. For instance, the 20,000,000-volt

SEC. PATTERSON EXTOLLS ARMY INDUSTRIAL MED. PROGRAM IN LABOR DAY ADDRESS (Cont'd)

Betatron machine, capable of producing X-ray pictures of steel 20 inches thick, could be deadly if the workers were not protected from its dangerous rays.

"To discover the dangers inherent in modern war production, to devise ways of safe-guarding the worker and to assure him that he will work under the best physical conditions, we have the Army Industrial Hygiene Laboratory at Edgewood Arsenal Maryland. Chemists, engineers, physicians and other scientists seek the solution to those problems—solutions, in many cases, that will be of as great importance to workers in private industry as to those employed by the War Department.

"It is clear to us of the Army that the man behind the gun will not have the gun but for the man behind the machine. We intend to keep those men and women as our friends.

"Our relations with labor are on firm ground. During the war, labor, like all Americans, produced for the Army, fought in the Army and died for their country in the Army. We can ask only one thing more of labor—that labor maintain its friendship for the Army, the same outspoken, cooperative friendship that we enjoyed during the war years. Never forget that the Army is your Army."

# 111 CIVILIAN MEDICAL EXPERTS NAMED CONSULTANTS TO SECRETARY OF WAR

Appointment of Ill additionals physicians, surgeons and psychiatrists of the Nation as civilian consultants to the Secretary of War through The Surgeon General, was announced recently by the War Department.

This action brings the number of civilian consultants in the Army Medical Department to more than 200. A previous announcement of appointments listed 60 actions tourgeons, 16 physicians and 18 neuropsychiatrists. Of the 111 announced, 62 are surgeons, 29 physicians and 20 neuropsychiatrists.

Major General Norman T. Kirk, The Surgeon General of the Army, under whose direction the armed services medical consultant program was initiated during the war, said the appointments are aimed at maintaining the highest standards of medical practice. Consultants will augment the Army staff of doctors caring for soldier patients and evaluate, promote and improve, whereever possible, the quality of medical care given American soldiers.

More consultants will be added in the future as the program is expanded, General Kirk said. He said that most of the appointees were veterans of medical service during the past war and thoroughly familiar with administrative and professional techniques employed in the Army's hospital system.

111 CIVILIAN MED. EXPERTS NAMED CONS. TO SECRETARY OF WAR (Cont'd)

Colonel Arden Freer, Medical Corps, is Director of Medical Consultants Division, Colonel Frank L. Cole, Medical Corps, is Director of Surgical Consultants Division; and Colonel John M. Caldwell, Medical Corps, is Director of Neuropsychiatry Consultants Division.

Medical consultants whose appointments and their specialties were announced today are:

Internal Medicine-Dr. Francis R. Dieuaide, 2 East 103rd Street, New York City; Dr. Yale Kneeland Jr., 620 West 168th Street, New York City; Dr. William S. Middleton, 2114 Adams Street, Madison, Wisconsin; Dr. Maurice C. Pincoffs, University of Maryland School of Medicine, Baltimore, Maryland; Dr. Thomas H. Sternberg, 1052 West Sixth Street, Los Angeles, California; Dr. Myles P. Baker, 70 Fairmount Street. Brookline, Massachusetts; Dr. John B. McKee, 114 West Boscawen Street, Winchester, Virginia; Dr. Paul Starr, 117 East Colorado Street, Pasadena, California; Dr. S. Marion Salley, 409 Huhtingdon Building, Miami, Florida; Dr. David R. Sacks, Nix Professional Building, San Antonio, Texas; Dr. Harold D. Warren, 903 Union Street, Brooklyn, New York; Dr. Monroe J. Romansky, 8029 Eastern Avenue, Silver Spring, Maryland; Dr. Garfield G. Duncan, 330 South Ninth Street, Philadelphia, Pennsylvania; Dr. Lester C. Feener, 401-403 Roberts-Banner Building, El Paso, Texas; Dr. Edgar Durbin, 4501 East Sixth Avenue, Denver, Colorado; Dr. James J. Waring, 4200 East Ninth Avenue, Denver, Colorado; Dr. Orlando B. Mayer, 1412 Bull Street, Columbia, South Carolina; Dr. John J. Sampson, 490 Post Street, San Francisco, California; Dr. William J. Kerr, University of California Medical School, San Francisco, California; Dr. Robert M. Shelton, 696 East Colorado Avenue, Pasadena, California; Dr. James Bordley III, Johns Hopkins Hospital, Baltimore, Maryland; Dr. Louis A. Zetzel, 53 Bay State Road, Boston, Massachusetts; Dr. Harry T. Harper Jr., 910 Marion Building Augusta, Georgia; Dr. Arthur C. Curtis, 1313 East Ann Street, Ann Arbor, Michigan; Dr. Wallace M. Yater, 1150 Connecticut Avenue, Washington, D. C.; Dr. Andrew G. Prandoni, 1200 Strand Street, West Englewood, New Jersey; Dr. Samuel Morrison, 3121 St. Paul Street, Baltimore, Maryland.

Pediatrics--Dr. Edward Campion, 1018 E. Street, San Rafael, California; Dr. John M. Nelson, 1558 Humboldt Street, Denver, Colorado.

Neuropsychiatric consultants named today are:

Max L. Hutt, 3660 Waldo Avenue, Bronx, New York, Clinical psychology; Mrs. Elizabeth H. Ross, 3255 P. Street, N.W., Washington, D. C., Psychiatric Social work; Dr. Malcolm J. Farrell, Walter E. Fernald State School, Waverly, Massachusetts; Dr. William H. Everts, Professional Office Building, New Rochelle, New York; Dr. Nolan D.C. Lewis, 723 West 169th Street, New York City; Dr. Alfred O. Ludwig, 101 Bay State Road, Boston, Massachusetts; Dr. Oscar B. Markey, Shaker Heights, Ohio; Dr. Ivan E. Berlien, Guardian Building, Detroit, Michigan; Dr. Roscoe W. Cavell, 10 Peterboro Street,

111 CIVILIAN MEDICAL EXPERTS NAMED CONS. TO SECRETARY OF WAR (Cont'd)

Detroit, Michigan; Dr. Orthelo R. Langworthy, Johns Hospkins Hospital,
Baltimore, Maryland; Dr. Bavid McK. Rioch, Chestnut Lodge Sanitarium,
Rockville, Maryland; Dr. Walter Freeman, 1028 Connecticut Avenue, N.W.
Washington, D. C.; Dr. William A. Scott, Kalamazoo, Michigan; Dr. Harvey M.
Cleckley, University of Georgia, Augusta, Georgia; Dr. Clarence H. Goddard,
696 East Colorado Street, Pasadena, California; Dr. Karl M. Bowman and
Dr. Alexander Simon, both of Langley-Porter Clinic, San Francisco, California;
Dr. Charles D. Aring, 3543 Washington Street, San Francisco, California;
Dr. Richard E. Kepner, Kailua, Oahu, and Dr. Ralph B. Cloward, Honolulu,
Hawaiian Islands.

Surgical consultants and their specialties are:

General Surgery—Dr. Fred V. Rankin, 271 Short Street, Lexington, Kentucky; Dr. John A. Hardy, Roberts Barnes Building, El Paso, Texas; Dr. John D. Lamon, Jr. Lovelace Clinic, Albuquerque, New Mexico; Dr. Carleton Mathewson, San Francisco Hospital, San Francisco, California; Dr. Joel W. Baker, 302 Maiden Lane, Seattle, Washington; Dr. Edward B. Speir, 437 Stimson Building, Seattle, Washington; Dr. Siegfried F. Herrman, 55 Summit Road, Tacoma, Washington; Dr. Gordon K. Smith, 1136 West Sixth Street, Los Angeles, California; Dr. Thomas W. Botsford, 4 Hawthorn Road, Brockline, Massachusetts; Dr. T. B. Quigley, 270 Commonwealth Avenue, Boston, Massachusetts; Dr. James W. Hubly, Dr. Fussell L. Mustard, and Dr. Richard A. Stiefel, all of 1407 Security National Bank Building, Battle Creek, Michigan; Dr. George D. Lilly, 333 Ingraham Building, Miami, Florida; Dr. Amos R. Koontz, 1014 St. Paul Street, Baltimore, Maryland; Dr. Fred H. Miller, 209 South Main Street, Dayton, Chio; Dr. William A. Farmer, 810 Carolina Street, Fayetteville, North Carolina; Dr. John C. Lee, Bellevue Hospital, New York City; Dr. Benjamin W. Rawles, 807 West Franklin Street, Richmond, Virginia.

Orthopedic-Dr. Louis Breck, 211 Mills Street, El Paso, Texas; Dr. David N. Cameron, 1333 First National Bank Building, El Paso, Texas; Dr. Leonard B. Barnard, 2939 Summit Street, Oakland, California; Dr. Ira O. McLemore, 1008 Summit Street, Seattle, Washington; Dr. Louis H. Edmunds, 1115 Terry Avenue, Seattle, Washington; Dr. William H. Goering, 740 St. Helens Avenue, Tacoma, Washington; Dr. Robert W. King, 1271 East Howard Street, Pasadena, California, Dr. Steele F. Stewart, 1133 Punchbowl, Honolulu, Hawaii; Dr. Carl Berg, 1801 Eye Street, N.W., Washington, D. C.; Dr. Milton Cobey and Dr. William J. Tobin, 1835 Eye Street, N. W., Washington, D. C.; Dr. W. W. Plummer 89 Bryant Street, Buffalo, New York.

Neurosurgery-Dr. Frank W. Lusignan, 909 Hyde Street, San Francisco, California; Dr. James W. Watts, 2014 R. Street, N.W., Washington, D. C.; Dr. Barnes Woodhall, Duke Hospital, Durham, North Carolina.

111 CIVILIAN MEDICAL EXPERTS NAMED CONS. TO SECRETARY OF WAR (Cont'd)

Urology-Dr. Raleigh L. Davis, 705 E. Houston Street, San Antonio, Texas; Dr. Wickliff R. Curtis, 109 North Oregon Street, El Paso, Texas; Dr. Thomas E. Gibson, 450 Sutter Street, San Francisco, California; Dr. William A. Sumner, 490 Post Street, Sam Francisco, California; Dr. Burton L. Stewart, 4346 Mariota Avenue, North Hollywood, California; Dr. Lloyd G. Lewis, Kennedy-Warren Apartment Washington, D. C.

Otology-Dr. Raymond T. Carthart, 124 West Pearl Street, Butler, Pennsylvania.

Plastic Surgery-Dr. Charles W. Tennison, Nix Professional Building, San Antonio, Texas; Dr. Truman G. Blocker Jr., Department of Surgery, University of Texas, Galveston, Texas.

Anesthesiology--Dr. John W. Winter, 132 Berry Court, San Antonio, Texas.

Obstetrics and Gynecology-Dr. Francis A. Snidow, 303 North Oregon Street, El Paso, Texas; Dr. Richard D. Pettit, 696 East Colorado Street, Pasadena, California.

Ear, Nose and Throat-Dr. M. P. S. Spearman, 2300 Grant Avenue, El Paso, Texas; Dr. Eugene S. Hopp, 2000 Van Ness Avenue, San Francisco, Cabifornia; Dr. Walter P. Work, 384 Post Street, San Francisco, California; Dr. Fordyce A. H. Johnson, 98 North Madison Avenue, Pasadena, California; Dr. William H. Jenkins, 1150 Connecticut Avenue, Washington, D. C.

Thoracic Surgery-Dr. Paul C. Samson, 2938 McClure Street, Oakland, California.

X-Ray-Dr. Richard S. Harrison, Huntington, Memorial Hospital, Pasadena, California; Dr. Wilbur O. Upson, 71 College Street, Battle Creek, Michigan; Dr. Arthur C. Christie; and Dr. Aubrey O. Hampton, 1835 Eye Street, N. W., Washington, D. C.

Ophthalmology—Dr. Grant Balding, 117 East Colorado Street, Pasadena, California; Dr. Paul L. Cusick, 1108 Stroh Building, Detroit, Michigan; Dr. L. Connor Moss, 1710 Rhode Island Avenue, N. W., Washington, D. C.; Dr. Frederick C. Cordes, 384 Post Street, and Dr. Max Fine, 350 Post Street, San Francisco, California.

Radiology--Dr. Edgar M. McPeak, 1835 Eye Street, N. W., Washington, D. C.

#### MUSTARD GAS STUDIED AS ANEMIA TREATMENT

A chemical agent which would have about the same effect as x-radiation on neoplastic tissue—the tissue of such malignant growths as cancer—has been sought for some years by medical investigators.

One now appears to have been discovered in a curious way. Although as a means of therapy it appears to have no particular advantage over x-radiation and in some ways is decidedly inferior, it is of great interest as the first material with some capacity for selective destruction of neoplasms to appear, and considerable research on its properties now is underway. It is of great significance, at least theoretically, as an opening wedge into a possible new field of medicine.

One of the terrors of the first World War was mustard gas, While this was not used by any combatant in the second World War, it naturally was studied by all the countries involved and improved forms were produced. Among these, both in the United States and Great Britain, were the so-called "nitrogen mustards." Their precise effects on the human organism were investigated in order to devise adequate defenses and proper medical treatment in case they were introduced by the enemy. They were found to produce profound anemias due to their specific effects on lymphatic tissue and bone marrow where blood cells are formed. The effect was very similar to that caused by heavy x-radiation.

This finding led to the possibility that, used in rigidly measured doses, they might actually be used as medicines for blood and lymph neoplasms. They are very potent poisons. The problem is to administer them by injection in such balance that they will do much more harm to unwanted tissue than to surrounding healthy and normal tissue. This also is the problem with x-ray treatment.

Experiments have been carried out in several institutions in order to obtain a fair evaluation of the nitrogen mustards before they are accepted as recognized medicinal agents. Among these institutions is the New York Memorial Hospital. The results have just been reported in a paper submitted to the War Department Surgeon General's Office by Captain D. A. Karnofsky of the Army Medical Corps who worked in cooperation with Drs. L. F. Craver, C. P. Rhoads and J. C. Abels.

The agents were used in treatment of several types of malignant anemias. In one type they proved quite successful. The results were comparable with those that would have been expected from x-radiation. This was Hodgkin's Disease, characterized by severe enlargement of the lymph nodes and the spleen, accompanied by a profound anemia which eventually proves fatal. The malady is rare, but has been known for about a century. Altogether 28 patients with this disease were treated at Memorial Hospital, Captain Karnofsky reports. Three, in which the condition was caught in its early stages, received no other treatment from the first. The others had

## MUSTARD GAS STUDIED AS ANEMIA TREATMENT (Continued)

received x-ray therapy. It was found that there were conspicuous beneficial effects. After each treatment there was temporary alleviation of the weakness, fever and loss of weight ordinarily associated with Hodgkin's Disease. There was an improvement in general well being. Anemia was improved in two relatively early cases, but there was no improvement in patients with severe anemia in advanced stages of the disease. There is no reason to believe that any cures have resulted from this therapy but life has been prolonged similar to that after x-ray therapy.

Transient regressions were obtained in cases of lymphosarcoma, a malignant growth of the lymph nodes, but the progress of the disease was not materially affected. Five of those treated were dead within 11 months of the recognized onset of the malady. The remaining patient, a year after the onset, is now in very poor condition. Other malignant maladies showed little improvement.

Nitrogen mustard, concludes the report: "is a chemotherapeutic agent with activity against sertain forms of neoplastic disease. Under present methods of therapy, however, it offered no therapeutic advantage over properly used x-rays. In fact, x-rays were ordinarily to be preferred. In certain dases of Hodgkin's Disease with generalized systemic symptoms for which x-ray treatment was no longer feasible or effective temporary symptomatic remissions were induced. The general use in preference to standard methods of x-ray therapy is not recommended until the therapeutic indications and limitations of this new agent are more precisely determined by further clinical studies."

#### ARMY MEDICAL OFFICERS STUDY IN CIVILIAN MEDICAL SCHOOLS

Eighty officers of the Army Medical Department are presently enrolled in civilian medical universities and colleges for the ultimate purpose of providing the best medical care possible to the American soldier, Major General Norman T. Kirk, The Surgeon General, announced recently.

During the calendar year of 1946, more than 180 officers will have taken specialized courses in some 25 medical or allied subjects in 27 of the Nation's leading medical schools. Many of the courses are of three months' duration while a few run up to a year. It is the Surgeon General's policy to assign officers to shorter courses wherever possible.

This program does not in any way interfere with the schooling for veterans under the GI Bill of Rights.

It is primarily aimed now at providing refresher courses for professional medical personnel who have been assigned to administrative duties during the war. General Kirk plans to have physicians and surgeons apply to the various American Specialty Boards for examinations in subjects which will cover each branch of practice in all major hospitals.

MORE:

ARMY MEDICAL OFFICERS STUDY IN CIVILIAN MEDICAL SCHOOLS (Continued)

The Surgeon General declared that no officer will be sent for graduate schooling if such an assignment would prejudice the welfare of any soldier patient.

Officers who receive specialized training will be expected to instruct their staffs in the latest techniques upon their return to active duty.

Army doctors are now studying to qualify for application to Specialty Boards for exams in Radiology, Internal Medicine, Dermatology and Syphilology, Ophthalmology, Otolaryngology, Neuropsychiatry, Surgery, Plastic Surgery, Orthopedic Surgery, Neurosurgery, Obstetrics and Gynecology, Anesthesiology, Urology, Pediatrics and Pathology.

Other courses in which Specialty Boards are not yet established, but which are attended by AND officers are Public Health, Physical Therapy, Nursing Education, Operating Room Technique and Management, Prosthetics Dentistry, Oral Surgery, Industrial Medicine, Pharmacy, Hospital Administration and Meat and Dairy Inspection.

Graduate schools attended by Army medical officers are at Johns Hopkins, Harvard, Yale, University of Pennsylvania, Vanderbilt, Creighton, Cornell, Washington University of St. Louis, Tufts, Duke, Columbia, University of Chicago, University of California, Baylor, Michigan, Mayo Foundation, Minnesota, Northwestern, George Washington, New York Medical College, Long Island College of Medicine, Oregon, Tulane, University of Tennessee, University of Kansas City School of Dentistry, Wayne University of Detroit, University Hospitals of Cleveland, and Cook County Graduate School of Medicine, Chicago.

### ARMY MEDICAL DEPARTMENT EXHIBIT VILL BE SHOWN AT AMERICAN HOSPITAL CONVENTION

First public showing in the East of the Army Medical Department's exhibit will take place at the 48th annual convention of the American Hospital Association in Philadelphia from September 30 to October 3.

Due to lack of space, some features of the mammoth exhibit will be eliminated, but about 90 per cent of the show, which had its premier in June at the American Medical Association convention, will be presented. Exhibit will be in Philadelphia Convention Hall, 34th Street and Curie Avenue, Philadelphia.

From Philadelphia, the exhibit will travel to Detroit where it will be displayed at the annual meeting of The Association of Military Surgeons from October 9-11. It is also scheduled for presentation in the Smithsonian Institute, Washington, D. C., early next year.

Theme of the exhibit is the advances of military medicine during World War II. Captain Klyde E. Kraft, MAC, Office of The Surgeon General, is director.

#### STUDY SHOWS "FLU" VIRUS EXISTS IN SEVERAL FORMS

The influenza virus, an almost infinitesimally minute living particle, not only exists in several forms but these forms are quite different and individualistic, as if they were different species of animals. This is the conclusion of Dr. Jonas E. Salk of the University of Michigan from investigations conducted with the aid of the Commission on Influenza of the Army Surgeon General's Office.

Determination of differences between strains is essential for preparation of more effective vaccines.

Since virus particles are too small to be seen differences can be found only in their behavior in certain physiological and chemical tests. It has been recognized for some years that there are two major types-Influenza A and Influenza B. The maladies caused by these are indistinguishable so far as overt symptoms are concerned, but their immunological reactions are quite different. A vaccine prepared from A virus is of relatively little value in protecting a person from influenza caused by B virus. The vaccine used by the Army is prepared from a mixture of both.

Dr. Salk's experiments show that within these two types there are highly individualistic strains. Since the flu viruses were first isolated several continuous hereditary lines have been maintained at various laboratories. He tested some properties of these strains -- especially a blood-agglutinating ability--under various degrees of heat. Heat tends to speed up chemical and physiological processes. Quite marked differences were found.

Like all other living things -- it is assumed that the girus particle is living because it possesses the fundamental properties of life -- these sub-cellular organisms seem bound by some fairly rigid law of heredity. Differences tend to become stabilized in families and persist.

Techniques evolved for finding these differences promise to be of some value in preparing more effective vaccine, the value of which now has been conclusively demonstrated by the army's tests with great numbers of men during the last year of the war.

#### ARMY RELEASES WORLD-WIDE VENEREAL DISEASE FIGURES

Two-tenths of one per cent or one of every 500 U. S. Army troops throughout the world were admitted to hospitals for treatment of venereal disease during the average week in July, 1946, the War Department announced recently.

A breakdown in the over-all figure gives the following rates for areas in which American troops were serving during the average week in July, 1946:

The United States-one-tenth of one per cent or one out of every one thousand troops.

The European Theater -- five-tenths of one per cent or one out of every 200 troops.

The Western Pacific Area-three-tenths of one per cent, or one out of every 333 troops.

Total overseas rate-four-tenths of one per cent, or one out of every 250 troops.

- 9 -

#### MEDICAL PROFS COMPLETE STUDY OF ROTC DUTIES AT BROOKE

Twenty two selected faculty members from medical schools in the United States completed a two-week indoctrination course in Reserve Officer Training Corps duties on September 14 at Brooke Army Medical Center, Fort Sam Houston, Texas.

All but three of the officers who took the course were reserve officers and are faculty members at the different medical institutions. All were veterans of active duty in the Army during the past war.

They will instruct ROTC classes at their respective medical schools during this school year. Meanwhile plans are under consideration to install ROTC courses in several medical schools not already offering that type of training.

In the ROTC program, The Surgeon General is responsible for policies which are promulgated. The Army Area surgeon under Army Ground Forces is responsible for the actual training given ROTC students at medical schools.

#### BAMC GRADUATES FIRST CLASS IN NEUROPSYCHIATRY

About forty medical officers graduated from the School of Military Neuropsychiatry of the Army Medical Department School, Brooke Army Medical Center, on Sept. 7.

Under the direction of Col. William C. Porter, the school consisted of a 12-week course covering the basic principles and practice of both psychiatry and neurology, with emphasis on methods adapted for Army use.

The course also consisted of clinical lectures and bedside work with patients in the neuropsychiatric service at Brooke General Hospital.

Another class is scheduled to start in November.

Through the Rockefeller Foundation, outstanding specialists in neuro-psychiatry were made available for visits to the school. Among them were Dr. Franklin Ebaugh of Colorado Psychopathic Hospital; Dr. Titus Harris, University of Texas Medical School, Galveston; Dr. Leo Bartmeier, Wayne Medical School, Detroit; Dr. William Everts, Neurological Institute, New York City.

"The purpose of the school is to train medical officers in military neuropsychiatry," Capt. Maurice R. Friend, class director, said. "The graduates of this school will be the future psychiatrists in the Army for the next few years."

Twenty-five Army murses attending the school were given particular attention in psychiatric nursing. Nurse instructor for the course is Major Leone G. Piekarski.

The school is the first of its kind at Brooke although it is a continuation of the School of Military Neuropsychiatry conducted since 1942 at Lawson General Hospital, Atlanta, Ga., and at Mason General Hospital, Brentwood, Long Island, N. Y.

### OFFICERS TRAIN AT VETERINARY SCHOOL

On June 12th the one thousandth veterinary officer was graduated from the Meat and Dairy Hygiene School at the Chicago Quartermaster Depot. The program, which was established in the fall of 1940 to give special training to veterinary inspectors of food for the Armed Forces, is being continued as a part of the Army's peacetime program. The Meat and Dairy Hygiene Course (MO-9) was increased from a period of 6 weeks to 8 weeks beginning with the 50th Class which reported for instructions on 22 July 1946, According to present plans, the course will be lengthened to 12 weeks within the next few months.

The fourse of instruction in the Meat and Dairy Hygiene School is undergoing constant change in order to keep it abreast of the numerous developments in the food industry and to better qualify veterinary officers for the exacting duties and requirements of food inspection and analysis work. Students and faculty alike have access to the latest books, publications, and journals of the food industry, all of which are maintained in the library of this school, which is considered one of the best and most up-to-date libraries of its kind in this country.

Several outstanding scientists and specialists, authorities in their own particular field, appear before each of the classes as guest lecturers and demonstrators, to familiarize both the faculty and students with the most recent developments in the food industry and present trends in food inspection and analysis. Dr. C. S. Bryan, formerly Professor of Bacteriology and Public Health, and author of the book "Dairy Bacteriology and Public Health," has given much valuable assistance as a guest lecturer in the methods used in the inspection of dairies and dairy plants and the laboratory analyses of milk and other dairy products. The latest and most scientific data on the various types of food poisonings and intoxications are discussed by such leaders in their field as Dr. G. N. Dack, Professor of Bacteriology, University of Chicago, author of the book "Food Poisoning," and Dr. L. D. Jensen, author of "Microbiology of Meats," formerly Professor of Experimental Bacteriology at the Mayo Foundation and President of the Society of Illinois Bacteriologists.

To assist veterinary officers in food inspection and analysis work, a Research and Development project has been established in the Meat and Dairy Hygiene School to study and improve food inspection and analysis equipment. This will be a continuing project, since constant developments in the food industry are foreseen.

The school staff, which is under the direction of Colonel Frank M. Lee, Depot Veterinarian, includes Major Donald C. Kelley, Director, and Captains Mulford C. Lockwood and Richard L. Stowe, Instructors.

### THE NURGEON GENERAL STRESSES NEED FOR NURSES

Major General Norman T. Kirk, The Surgeon General U. S. Army, stressed the need for the recall of 1,000 former Army Nurses to replace personnel now eligible for discharge and to insure the continued high standard of care for the 75,000 patients in Army hospitals throughout the world.

Legislation introduced in the closing days of the 79th Congress calling for the establishment of a Regular Army Nurse Corps failed to pass in the rush of more pressing legislation. Therefore, until such time as this legislation has been passed, it is not possible to take nurses into the Army Nurse Corps on a Regular Army status.

Former Army nurses who are interested in returning to active duty must be single and qualify for general duty and available for overseas service. As former officers, they must have an efficiency rating score of 35 to return in company grade and 40 to return in field grade. They will serve for a period of two years, or until relieved at the convenience of the Government.

A recent directive has authorized the wearing of civilian clothes while off duty. However, every nurse is required to maintain a complete Class A uniform for availability on formal military occasions.

### ARRIVALS, OFFICE OF THE SURGEON GENERAL

COLONEL SAMUEL A. COHEN, MC, of New York, N.Y., formerly of MDRP, Brooke Army Medical Center, Fort Sam Houston, Texas, assigned to Physical Standards Division, Disposition & Retirement: Branch.

LIEUTENANT COLONEL GEORGE K, ARNOLD, MC, of Dallas, Texas, formerly of MDRP, Brooke Army Medical Center, Fort Sam Houston, Texas, assigned to

Physical Standards Division, Disposition & Retirement Branch.

LIEUTENANT COLONEL ROBERT L. BLACK, PC, of Washington, D. C., formerly of Office of The Theater Chief Surgeon, United States Forces, European Theater, assigned to Office of Supply.

LIEUTENANT COLONEL IRVING R. LYMAN, MC, of Wichita Falls, Texas, formerly of Medical Section, Headquarters, Third Army, APO 403, New York,

N.Y., assigned to Office of Personnel, Overhead.

LIEUTENANT COLONEL CLARENCE H. WALSH, MAC, of Pawtucket, R. I., formerly of MDRP, Brooke Army Medical Center, Fort Sam Houston, Texas, assigned to Office of Plans & Operations, Troop Units Division, Theater & Troop Units Branch.

MAJOR FRANK A. MANTZ, JR., MC, of Cheyenne, Wyoming, formerly of China

Service Command, assigned to Office of Personnel, Overhead.

MAJOR EVERETT B. MILLER, VC, of Allentown, Pa., formerly of Army Medical Center, Washington, D. C., assigned to Historical Division, Historical Research & Manuscripts Branch.

## ARRIVALS, OFFICE OF THE SURGEON GENERAL (Continued)

MAJOR MILLARD C. MONNEN, MAC, of Youngstown, N.Y., formerly of MDRP, Brooke Army Medical Center, Fort Sam Houston, Texas, assigned to Physical

Standards Division, Disposition & Retirement Branch.

CAPTAIN PAUL A. LAVAULT, MAC, of Arlington, Va., formerly of Mason General Hospital, Brentwood, L. I., N.Y., assigned to Office of Personnel, Military Personnel Division, Classification & Records Branch.

## DEPARTURES, OFFICE OF THE SURGEON GENERAL

LIEUTENANT COLONEL ROBERT L. BLACK, PC, of Washington, D. C., formerly of Office of Supply, assigned to Industrial College of the Armed Forces, Washington, D. C.

LIEUTENANT COLONEL IRVING R. LYMAN, MC, of Wichita Falls, Texas, formerly of Office of Personnel, Overhead, assigned to MDRP, Brooke Army

Medical Center, Fort Sam Houston, Texas.

LIEUTENANT COLONEL CHARLES H. MOSELEY, MC, of Silver Spring, Maryland, formerly of Preventive Medicine Division, Office of the Chief, assigned to United States Forces, European Theater.

LIEUTEMANT COLONEL WILLIAM E. STROZIER, MC, of Houston; Texas, formerly of Physical Standards Division, Office of the Chief, assigned to

Separation Center, Fort George G. Meade, Maryland.

MAJOR JOHN J. LENTZ, JR., MAC, of Nashville, Tenn., formerly of Historical Division, Editorial Branch, assigned to Separation Center, Fort Dix. N. J.

MAJOR FRANK A: MANTZ, JR., MC, of Cheyenne, Wyoming, formerly of Office of Personnel, Overhead, assigned to Army Medical School, Army Medical

Center, Washington, D. C.

MIJOR DONALD F. WESTRA, MAC, of Waupun, Wisc.; formerly of Office of Personnel, Military Personnel Division, Procurement, Separation & Reserve Branch, assigned to Command & Staff College, Fort Leavenworth, Kansas.

CAPTAIN OLENA M. COLE, PT, of Bradford, Ill., formerly of Physical Medicine Consultants Division, Physical Therapy Branch, assigned to First

Regional Station Hospital, Fort Jay, N. Y.

CAPTAIN JOHN W. H. REHN, SnC, of Kensington, Md., formerly of Historical Division, Overhead, assigned to Separation Center, Fort George G. Meade, Maryland.

## REASSIGNMENTS, OFFICE OF THE SURGEON GENERAL

COLONEL WILLIAM D. GRAHAM, MC, of Laguna Beach, Calif., designated as Chief, Administration Branch, Hospital Division, Office of Plans & Operations, SGO & Assistant Chief, Hospital Division, Office of Plans & Operations, SGO.

LIEUTEMANT COLONEL GEORGE F. JEFFCOTT, DC, of Aberdeen, Md., transferred from Office of Personnel, Overhead to Historical Division, Historical Research & Manuscripts Branch.

REASSIGNMENTS, OFFICE OF THE SURGEON GENERAL (Continued)

LIEUTENANT COLONEL JOHN W. KEMBLE, MC, of Erie, Pa., designated as Assistant Chief, Administration Branch, Hospital Division, Office of Plans & Operations, SGO & Assistant Chief, Hospital Division, Office of Plans & Operations, SGO.

LIEUTENANT COLONEL WILLIAM T. SMITH, MC, of Tulsa, Okla., designated as Assistant Chief, Hospital Division, Office of Plans & Operations, SGO.